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PATENT APPLICATION TRANSMITTAL		Atty Docket No.: 4700-4		Total Pages: 51																																																	
		First Inventor or Application Identifier: McTernan																																																			
		Express Mail Label No.: EL595827209US																																																			
BOX PATENT APPLICATION Assistant Commissioner for Patents Washington, D.C. 20231																																																					
<p>Re: Applicant(s) or Identifier: Brennan J. McTernan et al.</p> <p> Serial No. : To be Assigned</p> <p> Filed : Concurrently Herewith</p> <p> Title : SYSTEM AND METHOD FOR ACCOUNTING FOR VARIATIONS IN CLIENT CAPABILITIES IN THE DISTRIBUTION OF A MEDIA PRESENTATION</p> <p>Kindly file the annexed papers indicated below:</p> <p><input checked="" type="checkbox"/> Application for Patent including Specification (38 pages) and Drawing(s) (8 sheets)</p> <p><input checked="" type="checkbox"/> Declaration and Power of Attorney</p> <p><input checked="" type="checkbox"/> Return Receipt Postcard</p> <p>The fee has been calculated as follows:</p> <table border="1"> <thead> <tr> <th></th> <th>Claims</th> <th>Claims Paid for</th> <th>Extra</th> <th>Rate (Sm. Ent.)</th> <th>Fee</th> <th>Rate</th> <th>Fee</th> </tr> </thead> <tbody> <tr> <td colspan="4">BASIC FILING FEE</td> <td>\$ 355</td> <td>\$355</td> <td>\$ 710</td> <td>\$</td> </tr> <tr> <td>Total</td> <td>14</td> <td>- 20 =</td> <td>0</td> <td>x \$9</td> <td>\$</td> <td>x \$18</td> <td>\$</td> </tr> <tr> <td>Indep.</td> <td>3</td> <td>- 3 =</td> <td>0</td> <td>x \$40</td> <td>\$</td> <td>x \$80</td> <td>\$</td> </tr> <tr> <td colspan="4">MULTIPLE DEPENDENT CLAIM PRESENT</td> <td>+ \$135</td> <td>\$</td> <td>+ \$270</td> <td>\$</td> </tr> <tr> <td colspan="4"></td> <td>TOTAL</td> <td>\$355</td> <td></td> <td></td> </tr> </tbody> </table> <p><input checked="" type="checkbox"/> A check in the amount of \$355.00 is enclosed.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge the fee of \$.00 to the undersigned attorney's Deposit Account No. 02-4270.</p> <p>Respectfully submitted,</p> <p>Dated: <u>January 22, 2001</u></p> <p>By: </p> <p>Seth H. Ostrow, Reg. No. 37,410 Brown Raysman Millstein Felder & Steiner LLP Attorney for Applicants 120 West Forty-Fifth Street New York, New York 10036 Phone: (212) 944-1515 Fax: (212) 840-2429</p>							Claims	Claims Paid for	Extra	Rate (Sm. Ent.)	Fee	Rate	Fee	BASIC FILING FEE				\$ 355	\$355	\$ 710	\$	Total	14	- 20 =	0	x \$9	\$	x \$18	\$	Indep.	3	- 3 =	0	x \$40	\$	x \$80	\$	MULTIPLE DEPENDENT CLAIM PRESENT				+ \$135	\$	+ \$270	\$					TOTAL	\$355		
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